



SE-955 Inspection/Material Testing Order

OWNER

CONSULTANT

PROJECT NAME: _____

(Owner Project Number)

(Master Agreement Contract Number)

(Owner Inspection Order Number)

FEE INFORMATION**INSPECTION SERVICE****Inspection Fee**

- ☐ Building
☐ Mechanical
☐ Electrical
☐ Plumbing
☐ Fire Protection
☐ Special Inspection
☐ Material Testing

Reimbursables: _____

Contract Total: _____

(Other Owner Information)

SCHEDULEStart DateCompletion Date

In response to the Request for Inspection Services from the Owner, dated the _____ day of _____, 20____, the Owner and Consultant agree, as indicated by the signatures below, to the scope of services as described in the Consultant's *Proposal for Inspection Services* dated _____, 20____, and this Inspection Order shall be assigned to the Master Agreement for Inspection Services (SE-950) identified above.

OWNERBY: _____
(Signature of Owner Representative)

(Print or Type Name of Owner Representative)

ITS: _____

CONSULTANTBY: _____
(Signature of Consultant Representative)

(Print or Type Name of Consultant Representative)

ITS: _____

Inspection Order consists of:

1. SE-955
2. Owner Request for Inspection/Testing Services
3. Consultant's Proposal for Inspection/Testing Services
4. Consultant's Approved Hourly Rate
5. Consultant's Approved Reimbursable Schedule